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VOLPE AND KOENIG, P.C. UNITED PLAZA, SUITE 1600 30 SOUTH 17TH STREET PHILADELPHIA, PA 19103 Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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FILED ELECTRONICALLY ON May 29, 2009

| | | | | Way 23, 2003 | | | |
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| | | | | Ryan W. O'Donnell | | (Depositor's name) | |
| | | | | Rum W. | O'Dull | (Signature) | |
| | | | | May 29, 2009 | | (Date) | |
| APPLICATION NO. | FILING DATE | <u> </u> | FIRST NAMED INVEN | | ATTORNEY DOCKET NO. | CONFIRMATION NO. | |
| 10/561,630 | 12/20/2005 | Takeyuki Ajito | | <u> </u> | SIP-PT007 | 8280 | |
| TITLE OF INVENTION: | | | | | • | | |
| | CQUISITION METHOD | AND CALIBRATIA | ON SVSTEM FOR I | MAGE DISBLAY DE | VICE | | |
| CONNECTION DATA | OQUISITION WILTHOU | AND CALIBRATI | ON STOTEWITOR | WAGE DIGI CAT DE | VIOL | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE F | EE PI | UBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE | |
| nonprovisional | NO | \$151 | 0 | \$300 | \$1810 | 07/30/2009 | |
| EXAM | IINER | ART UN | IIT C | LASS-SUBCLASS |] | | |
| BURLESON, MICHAEL L | | 2625 | 2625 358-001900 | | • | | |
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| ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | |
| | | | 2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed. | | | | |
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| | | | | | | | |
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| Typed or printed name Ryan W. O'Donnell | | | Registration No. 53,401 | | | | |
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